

Vonda M. Wallace  
Paralegal Specialist

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO.	FILING DATE	
						APPLICANT(S)		C 9/830769
CLAIMS								
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				
IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	
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TOTAL IND.								
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TOTAL CLAIMS								

TO-1360 (8-78)

\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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